PTO/S8/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR	NUMB	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
BAS	IC FEE CFR 1.15(a))							150	OR		.300
TOTAL CLAIMS				minus 20 = •			×:25.			x . 50	1.280
IND	EPENDENT CLAU	vis .	minus 3 =				x : /00 .		OR	× 200	
, , , , , , , , , , , , , , , , , , , ,							190	-	OR	240	 -
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ 5 6V =		OR	+: 340	<u></u>
. 11	* If the difference in column 1 is less than zero, enter "O" in column 2.								OR	TOTAL	<u> </u>
CLAIMS AS AMENDED - PART II											
									OR	OTHE	R THAN
L	(Cotumn 1)			(Column 2)	(Cotumn 3)		SMALL I	ENTITY	1	SMALL	ENTITY
AMENDMENT A	7/8/6	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
M	Total proprise	. 24	Minus	-24			۰, <u>ک۲.</u>	1	OR	x : 50 -	1
Z	Independent (37 CFR 1.1504)	3	Minus	- 3	#	П	× : 100 =		OR	x :200 :	
₹	FIRST PRESENT	ATION OF MULTIPLE	E OEPENDI	ENT CLAIM (37 CF	R 1.15(dj)		+.180.		OR	360	
						•	TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
Ì							7000.00				
H	id i	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	l I					
AMENDMENT B	(Jastas	REMAINING AFTER AMENDMENT	•	NUMBER PREVIOUSLY PAID FOR/	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Į	Total parcenius(d)	. 178	Minus	. 24	:4		x:25=		OR	x : 50 .	400
	Independent (37 CFR 1.16(b))	• 4	Minus	<u>" 3</u>	= //		x 5./00=		OR	x 200-	300
₹	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))		+,180.		OR	+.34a	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	(007)
(Column 1) (Column 2) (Column 3)											,
O 5		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
MENDMENT	Total (37 CFR 1.18(4))	· WEATHER!	Minus	**************************************	=		×.25.		OR	x:50.	100
	Independent (37 CFR 1.190/8	•	Minus	***	=		× . /90 .		OR	. 200	
AME		ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	₹ 1.18(Δ))		·. 80.	·	OR	+.860.	
Г							TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
	If the entry in cotumn 1 is less than the entry in cotumn 2, write "0" in cotumn 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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